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EXAMINER



600182603686

07/01/10--01023--009 **25.00



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MEM AUTO GARTS' LLC	
Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Shather Vaclilla	_
Name of Person	
M/2	
1713 1. + MM S4 #11	2 2 1 8 2 1 8 1 1 1 1 1 1 1 1 1 1 1 1 1
Address	
1000 /L- 3300	
City/State and Zifp Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	27
LOCHLOR at 0/3 7/2-9/64	,
Name of Person Area Code & Daytime Telephone Numb	er
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certific (additional copy is enclosed) Certific	iling Fee, cate of Status & ed Copy onal copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		I&M AUTO PARTS LLO			
	(Name of the Limited	Liability Company as it now and Florida Limited Liability Compan	ears on our records.) y)		
The Articles of C	aganization for this Limited Li	ability Company were filed on _	MAY 28, 2010	and assigned	
Florida documen	number <u>L1000057</u>	<u>'596</u> _			
This amendment	submitted to amend the follo	owing:			
A. If amending	name, enter the new name of	the limited liability company	<u>here</u> :		
		N/A			
'L.L.C." Enter new princ (<i>Principal office</i> Enter new mail	t be distinguishable and end with the distinguishable and end with the part offices address, if applications address MUST BE A STREE address, if applicable: MAY BE A POST OFFICE	TADDRESS) N/A	npany," the designation of BODY S, Bivorview,	TRANSF.	
	the registered agent and/o and/or the new registered of	or registered office address office address here:	n our records, <u>enter</u>	7	
Name o	fiNew Registered Agent:	LUISA METALLO			
New Re	sistered Office Address:	8024 South 782	14. T.		
	Enter Florida street address				
•		RIVERVIEW	, Florida _	33569	
\$1 		City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent;

I hereby acceptifie appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the oblightions of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to marely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Man MGRM = M	iager analing Member		
<u>Title</u>	name	Address	Type of Action
MGRM	NGELO METALLO SR.	8029 S. 78TH ST. RIVERVIEW EL 33569	Add Remove
MGRM	ANGELO METALLO JR.	8029 S. 78TH ST. RIVERVIEW, FL. 33569	Add Remove
MGRM	LUISA METALLO	8024 s. 78TH ST. RIVERVIEW FI 33569	Add Remove
			Add Remove
<u>.</u>			Add Remove
·			ART C
D. If amend	ing my other information, enter ch	ange(s) here: (Attach additional sheets, if necess	sary.)
Dated	JUNE 25	2010 .	
	Ar	mber or authorized representative of a member ORCIO MCTALLO Ved or printed name of signee	

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